X SUMMONS FOR WITNESS		DOCKET NUMBER		Trial Court of Massachusetts District Court Department		
SESSION: X CRIMINAL X TRIAL			NAME AND ADDRESS OF COURT DIVISION YOU MUST		YOU MUST	
IAME, ADDRESS AND ZIP CODE OF DEFENDANT			Quincy District Court One Dennis F. Ryan Parkway Quincy, MA 02169 Chief Justice: Hon. Mark F. Coven		APPEAR AT THIS COURT ADDRESS ON THE DATE	
				DATE AND TIME OF APPEARANCE:		
Commonwealth v.			March 5, 2012 at 8:45am JURY TRIAL		AND TIME SPECIFIED HEREIN	
				DATE TIME		
NAME, ADDRESS AND ZIP CODE OF WITNESS			OFFEN			
Ms. Kate Corbett				ession of Class B Substance		
Mass. Department of Public Health William A. Hinton State Laboratory Institute 305 South Street						
Jamaica Plain, Mass. 02130						
TO ANY PERSON AUTHORIZED TO SERVE CRIMINAL PROCESS IN THE COMMONWEALTH: You are hereby commanded to forthwith serve the annexed summons upon the defendant or witness named within by delivering it to the defendant or witness personally, or by leaving it at the dwelling house or usual place of abode of the defendant or witness with some person of suitable and discretion then residing therein, or by mailing it to the last known address of the defendant or witness. NOTE: A summons for a witness may also be served by any person authorized to serve a summons in a civil action. See Rule 17(d)(1) of the Massachusetts Rules of Criminal Procedure. To the above named Witness: You are hereby required in the name of the Commonwealth, to make your appearance before the Justices of the Court on the date and time noted above, and to appear from time to time and day to day thereafter as ordered. WARNING TO WITNESS: Failure to appear in accordance with this summons may result in the issuance of a warrant for your arrest. Please bring this document with you to court. Please check in on the 2 nd floor at the District Attorney's Office If you do not appear, the case may be dismissed.					•	
WITNESS:		Led Whomsain		12/14/2016		
	Michael W	/. Morrissey, District Attorney				
	1	RETURN OF SE	RVICE	I		
I hereby certify that	I served th	ne within summons upon the abo				
□ Leaving a co a person of suitable × Mailing a cop □ I received th	opy of it at t age and d by of it to th	iscretion residing therein. ne last known address of the def	e of abo endant	ode of the defendant or witness w or <u>witness</u> unable to make service	ith	
because:						
DATE OF SERVICE		SIGNATURE OF PERSON MAKING SERVICE		TITLE OF PERSON MAKING SERV	TITLE OF PERSON MAKING SERVICE	
12/23/11		/s/ Eric Haskell		Norfolk County D.A.'s Office		